

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)

NAME Port of Port Angeles
338 West First Street
ADDRESS P.O. Box 1350
Port Angeles, WA 98362
COUNTY Clallam
FACILITY Wash Down Facility
LOCATION Tumwater Street and Marine Drive

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

ST 6190
PERMIT NUMBER

(17-19)

CTY
DISCHARGE NUMBER

Submit Monthly

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before
completing this form.

MONITORING PERIOD								
YEAR		MO	DAY	TO	YEAR		MO	DAY
			01					
(20-21)		(22-23)	(24-25)		(26-27)		(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
Flow	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT		Report	gpd					n/a	1/Batch	Meter		
TSS	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT						Report	mg/L	n/a	1/Batch	Grab		
pH	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT				6		9	s.u.	0	1/Batch	Grab		
Oil & Grease	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT						100	mg/L	0	1/Batch	Grab		
Arsenic (As)	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT						0.01	mg/L	0	1/Batch	Grab		
Cadmium (Cd)	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT						0.1	mg/L	0	1/Batch	Grab		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 USC § 1001 AND 33 USC § 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO \$10,000.00 AND OR MAXIMUM IMPRISONMENT OF BETWEEN SIX MONTHS AND FIVE YEARS.)				TELEPHONE			DATE				
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			AREA CODE	NUMBER	YEAR	MO	DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)													

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Chromium (Cr)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						2.0	mg/L	0	1/Batch	Grab	
Copper (Cu)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						1.0	mg/L	0	1/Batch	Grab	
Lead (Pb)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.5	mg/L	0	1/Batch	Grab	
Nickel (Ni)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						1.5	mg/L	0	1/Batch	Grab	
Zinc (Zn)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						1.5	mg/L	0	1/Batch	Grab	
Mercury (Hg)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.05	mg/L	0	1/Batch	Grab	
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Silver (Ag)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.5	mg/L	0		1/Batch	Grab
Selenium (Se)	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT						0.01	mg/L	0		1/Batch	Grab
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
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